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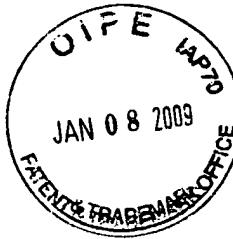
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10/17/2008

David E. Grober
616 Venice Blvd.
Venice, CA 90291

01/08/2009 EEKUBAY2 00000041 10647892

01 FC:2501 755.00 OP
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<i>DAVID E. GROBER</i>	(Depositor's name)
<i>David E. Grober</i>	(Signature)
<i>10/28/2008</i>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/647,892	08/25/2003	David E. Grober		7103

TITLE OF INVENTION: AUTONOMOUS, SELF LEVELING, SELF CORRECTING ANTI-MOTION SICKNESS CHAIR, BED AND TABLE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755	\$300	\$0	\$1055	01/20/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
OLSON, LARS A	3617	114-191000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

- Issue Fee
- Publication Fee (No small entity discount permitted)
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- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature DAVID E. GROBER

Date 10/28/2008

Typed or printed name DAVID E. GROBER

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